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Initiative Enhances Care for Veterans

By Sarah Marshall
WRNMMC Public Affairs
staff writer

In support of our nation's veterans, Walter Reed National Military Medical Center (WRNMMC) launched an initiative with three local Department of Veterans Affairs (VA) medical centers to continue providing quality care for those in need.

The Martinsburg, W.Va., Baltimore, Md., and Washington, D.C., VA medical centers have had a long-standing Health Resource Sharing Agreement with WRNMMC, along with Fort Belvoir Community Hospital, which allows their VA patients on a health care system separate from the Department of Defense (DoD), to receive health care at WRNMMC, explained Army Col. Rachel Armstrong, director of VA Partnerships at WRNMMC.

"These are veterans who have served their country; Walter Reed [National Military Medical Center] has the capacity to provide the care ... and it's the right thing to do," Armstrong said.

Leadership at the DC VA Medical Center recognized a need for support with their orthopedic services, and reached out to WRNMMC, she said. From there, the initiative blossomed. A similar initiative was established with the Martinsburg VA Medical Center. Over the last several months, leadership from each of the medical centers spent countless hours collaborating with clinical services and staff. In March, the first VA patients were seen at WRNMMC. Through this initiative, VA patients, who may be on a waiting list, will be able to receive those services here at WRNMMC in a timely manner. The hope is to continue expanding the initiative



Photo by Sarah Marshall

Ensign Hannah Parker, a 5 Center nurse at Walter Reed National Military Medical Center (WRNMMC), chats with 28-year Army veteran James Hall as he prepares to be discharged from WRNMMC May 1. Hall is one of the first Veterans Affairs (VA) patients to receive care through a new initiative, aiming to assist the VA in continuing to ensure high quality care for our nation's veterans.

to other clinical services, she said, and most importantly, ensuring everything runs smoothly for the patient.

Through this initiative, VA patients can receive orthopedic procedures at WRNMMC, such as total joint replacement, rotator cuff surgery, and tumor surgery for oncology patients, explained Cmdr. (Dr.) David Gwinn, chief of orthopedic surgery at WRNMMC.

The orthopedic spine surgeon said WRNMMC will take on about two to four orthopedic surgeries per week, he said, helping the VA reduce

any delays in seeing patients.

"It's a mutually beneficial program. It allows the VA patients to get timely care in an environment they are familiar with, and we increase our case volume and interaction with the veteran community," Gwinn said, thereby increasing WRNMMC readiness by keeping residents' and providers' skills high, as they continue to stay busy practicing their trade.

The process begins with a referral, Armstrong explained. VA providers refer their patients, as they normally would

for a specialty procedure. The VA works with the External Programs Referral Office (EPRO) at WRNMMC to coordinate appointments. EPRO is the central hub at WRNMMC for all coordination with the VA.

Armstrong added that this initiative is a wonderful opportunity for the Department of Defense to share federal health resources with the VA.

"It has been a fabulous opportunity," she said.

Gwinn agreed that being involved in this initiative has been rewarding.

"We've had a great deal of help from ancillary services in support of this initiative as well," he added, from Internal Medicine, screening patients, to Physical Medicine and Rehabilitation, taking care of patients post-operatively. "There's been a lot of good coordination with our departments here that allowed this to come into fruition."

So far, he said, the VA patients who received care at WRNMMC through this initiative expressed their appre-

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Commandant's Column

Greetings Team 88,
Like the Sailing Directions publication that assists mariners in planning long voyages by aiding navigation along the way, the chief of naval operations' "Sailing Directions" lay out a course for the Navy. The CNO Sailing Directions can be interpreted as a user's guide that outlines the Navy's mission and the CNO's vision, tenets, and principles. In this column I will discuss how Naval District Washington aligns with the key tenets of CNO's Sailing Directions: Warfighting First, Operate Forward, and Be Ready in supporting the Fleet, Fighter, and Family.



**Rear Adm.
Markham K. Rich
Commandant, Naval
District Washington**

It is our job to ensure that we support the CNO and Navy's primary mission of warfighting by providing sustainable facilities and responsible quality of life programs so that our more than 200 mission-oriented tenet commands can focus on their operational missions.

Warfighting First

Two great examples of Warfighting First are the mission activities at Naval Air Station Patuxent River and NSA South Potomac. NAS Patuxent River is the Navy's premier-flight-test and evaluation center and remains one of the most vital Navy shore installations today. Every aircraft flown by the Navy is developed and tested at NAS Patuxent River first.

Key technological capabilities that will define the future fleet are being designed and developed today at NSA South Potomac. Scientists and engineers are lending their knowledge, expertise, and innovation so that our nation is never outflanked by adversaries. NSA South Potomac supports Warfighting First through research and development that anticipates the needs of the next generation's warfighter.

NSA South Potomac is the Navy's principal proving ground for proofing and testing every major naval gun and all ammunitions supplied to the fleet. Dahlgren's Potomac River Test Range is the only over-water test range in the Navy and provides the perfect environment to test every gun that goes on a Navy ship.

Naval Support Activity Washington is home to some of the Navy's largest headquarters commands, including the Naval Sea Systems Command and the Naval Surface Warfare Center Carderock where testing is done for all new ships and submarines. In many ways Navy warfighting begins at NDW.

Operate Forward

When the CNO says operate forward, he means that we have a global maritime mandate. We are at our best when we are out and about and able to provide off-shore options to the president. That's what we have been doing for more

than 230 years and that's what we will continue to do in the future.

Did you know that there are operations abroad that are directly supported here in this region? The unmanned air system known as Broad Area Maritime Surveillance-Demonstrator, or BAMS-D, resides at NAS Patuxent River and supports in the U.S. Fifth Fleet while concurrently completing maintenance and test operations at NAS Patuxent River. Since arrival in theater in January 2009, BAMS-D has flown more than 15,000 hours in support of global operations.

The region's Afghanistan/Pakistan Hands program provides training and administrative support to over 100 "hands" Program personnel typically complete six to eight months of language, cultural, and combat training before a 10- to 12-month deployment – boots on ground in Afghanistan or Pakistan.

Be Ready

Readiness is the critical link that achieves the Navy's purpose and ensures that Navy meets its mandate. The Be Ready tenet is about building competency, proficiency and resiliency in our units, the weapons systems they use to carry out the mission, as well as the individual sailors, Navy civilians and families that make up the finest Navy on earth.

Great examples of this tenet can also be found

See **COMMANDANT** page 9

Bethesda Notebook

Women's Health Week

May 10-16 is National Women's Health Week, and in observance there will be a week of health prevention and wellness events at Walter Reed National Military Medical Center (WRNMMC). Mammogram screenings will be offered to eligible beneficiaries on May 9 and 16 from 9 a.m. to noon. To schedule a screening, call 301-319-8502. Other information concerning breast health, diabetic screenings and blood testing, as well as wellness/public health information, will be available in the America Bldg. lobby throughout the week.

Military Spouse Appreciation Day

Friday, May 8 is Military Spouse Appreciation Day. President Ronald Reagan declared the day by presidential proclamation in 1984 in order to recognize the profound commitment, sacrifice and support that military spouses give in support of our Armed Forces. Naval Support Activity Bethesda's Fleet and Family Support Center will host an appreciation event at the Navy Exchange from 10 a.m. to 2 p.m. Come join us!

WRNMMC Leadership Academy

The next Leadership Academy at WRNMMC is May 18-22 in Bldg. 5, Heroes Zone, Rm. 4028. Registration ends May 13 and can be accomplished at <http://tinyurl.com/WRNMMC-LSA-RBCT>. Class size is limited to 28. Anyone in a middle manager role or aspiring to a middle manager role is encouraged to attend the academy. Some of the topics to be covered include leadership and development, quality improvement, personnel management, 21st Century Healthcare, The Patient Experience and more.

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Perfecting Patient Care

National Capital Region Medical Directorate Hosts Quality Conference

By Bernard S. Little
WRNMMC Public Affairs
staff writer

With a focus on perfecting patient care, providers and staff from the National Capital Region Medical Directorate (NCR MD) met for the Inaugural NCR MD Quality Conference April 23 at Fort Myer, Va.

Rear Adm. (Dr.) Raquel Bono, NCR MD director, hosted the day-long conference, which was attended by more than 100 physicians, nurses, administrators and other staff members from military treatment facilities (MTFs) throughout the region. “No matter what you do [in the NCR MD], you’re a caregiver,” Bono said. “If you’re the person answering the phone, you’re a caregiver. If you’re the one helping to show our patients where they need to go [within our MTFs], you’re a caregiver. If you’re the person who’s helping to run our data, you’re a caregiver. If you’re the person helping us to figure out our funding, you’re a caregiver.”

As the largest component of the Defense Health Agency (DHA), the NCR MD exercises authority, direction, and con-



U.S. Navy Photo

trol over Walter Reed National Military Medical Center, Fort Belvoir Community Hospital, and their subordinate clinics; DiLorenzo TRICARE Health Clinic, Tri-Service Dental Clinic, Fairfax Health Center, and Dumfries Health Center and the Joint Pathology Center (JPC).

The NCR MD also exercises enhanced Multi-Service Market authorities over these DHA facilities and Naval Health Clinic Quantico and its subordinate Washington Navy Yard Branch Health Clinic; Naval Health Clinic Annapolis, Kimbrough Ambulatory Care Center and its subordinate Andrew Rader Army Health Clinic and Fort Mc-

Nair Army Health Clinic; and Malcolm Grow Medical Clinic and Surgery Center (779th Medical Group), and its subordinate Pentagon Flight Clinic; and Bolling Clinic (579th Medical Group).

Air Force Lt. Gen. (Dr.) Douglas Robb, DHA director, challenged conference attendees to commit themselves to helping establish a “Military Health System aggregate” by reducing variation in care, improving patient safety, quality, health information technology, clinical decision making and outcomes.

“It’s important we do better than what we currently are,” Robb said. “The golden rule of medicine is to treat every patient exactly how you would want your son or daughter treated.”

The MHS is tasked with “making ourselves the organization we want to be, the organization we’re proud to be in, the organization we want our husbands and wives, our sons and daughters, and our mothers and fathers to be seen in. The NCR MD is going to lead by example,” the general added.

A patient panel at the event encouraged caregivers to better include beneficiaries in

their health care decision-making processes. The panel consisted of a retired Army colonel, a NCR MD patient, and a retired Air Force lieutenant colonel, who is the father of a patient.

“The most under-utilized resource in health care is the patient,” said retired Col. Brian Foley, a deputy commander for the former Walter Reed Health Care System and an active beneficiary of the MHS. “The basis of the continuity of care and patient safety is a comprehensive health information [system], available 24/7 to all providers. The foundation of quality care and patient safety is a medical home and capable primary care manager team. Communication among all the health care providers, to include input from patients and their families, is critical to quality care and patient safety.”

Foley encouraged teaching beneficiaries to use RelayHealth, which provides clinical connectivity to physicians, patients, hospitals and more, using innovative health information technology and in use throughout the NCR MD.

Terri Kopanski, a breast cancer survivor, emphasized not only the need for patients

to be included in decisions affecting their health care, but also for caregivers to exhibit compassion for those whom they treat and to listen to the concerns of beneficiaries. She also encouraged beneficiaries to be their own advocates for their care.

Retired Air Force Lt. Col. Sean P. Robinson explained that when his young son Patrick was diagnosed with cancer in 2013, Robinson and his wife became advocates for his care, making sure they were there during the multi-disciplinary rounds of caregivers and providing input to the health care team.

“They listened to our input, [and] we made sure that our questions were answered, and that they valued our opinions,” Robinson said. “Sometimes the decisions made were based on our input and feedback. As parents we really appreciated that – we actually had input into decisions that were made. That made a big difference.”

Other issues discussed during the conference included quality measurement, design thinking methodology, ending patient harm and relationship-centered care.

BUMED Visual Information Department Directorate Receives DoD Award

By Sarah Marshall
WRNMMC Public Affairs
staff writer

The Navy’s Bureau of Medicine and Surgery (BUMED) Visual Information (VI) Directorate, located at Walter Reed National Military Medical Center (WRNMMC), earned bragging rights once again, recently bringing home several prestigious awards, including 2014 Production of the Year for their suicide prevention training video.

The Commandant of the Defense Information School announced the winners of the Department of Defense’s (DOD) 2014 Visual Information Production Awards (VIPA) March 31.

The VI Directorate won four awards, including Production of

the Year for their film, “Every Sailor, Every Day.” The film is currently being used Navy-wide for suicide prevention training, and a wider release is expected soon. It will also be submitted to the International Defense VI Awards competition, to take place in Rome later this year, during which they will represent the entire U.S. DOD VI community.

Additionally, the VI Directorate took first place in the Training and Education category for their suicide prevention video, produced by Emre Tufekcuoglu, director/scriptwriter and director of photography. In the same category, they took third for their video “Chikungunya Awareness,” produced by Nick Stowers. In the Recruitment



Photo Courtesy of Visual Information Directorate

Visual Information staff members created a 18-minute short film “Every Sailor Every Day.” It was filmed on location at Walter Reed National Military Medical Center and Naval Support Activity Bethesda with 12 actors and more than 60 extras, spanning 14 filming days with more than 20 crew members.

See BUMED page 8

Darnall Medical Library Named Library of the Year

By Sharon Renee Taylor
WRNMMC Public Affairs
staff writer

The Federal Library and Information Network (FEDLINK) recently recognized Darnall Medical Library (DML) at Walter Reed National Military Medical Center (WRNMMC) as its Small Library of the Year.

The national award for federal librarianship recognizes the many innovative ways that federal libraries, librarians and library technicians fulfill the information demands of government, business and scholarly communities and the American public.

Located in Bldg. 1, on the third floor, Darnall Medical Library serves the clinical and research needs of WRNMMC staff and students, along with a number of outlying facilities in the National Capital Region including the White House and Pentagon clinics. The medical center has 68 graduate medical education programs, with approximately 750 trainees, and an additional 250 students who cycle through various nursing subspecialty programs each year. More than one-third of the research conducted in the Military Health System takes place at WRNMMC.

"This is a tremendous accomplish-



Photo by Mass Communication Specialist 1st Class Christopher Krucke

Walter Reed National Military Medical Center (WRNMMC) senior officials and Darnall Medical Library staff members cut the ribbon to re-dedicate the library in February following renovations in the facility located in Bldg. 1, third floor. The library recently was named Small Library of the Year by the Federal Library and Information Network (FEDLINK).

ment and a tribute to strong leadership," said Army Col. (Dr.) Michael R. Nelson, director for Education, Training and Research at WRNMMC.

Library Director Kimberly D. Adams and eight library staffers accepted the library of the year award in a Library of Congress ceremony May 5. The DML was recognized for dedicated library

leadership in support of quality patient care and health education.

"Ms. Adams, congratulations to you and your team! This is a huge tribute and acknowledgement of all that you do for our patients and our people," wrote WRNMMC Director Brig. Gen. (Dr.) Jeffrey B. Clark, in a memo to leadership.

Through a clinical librarian program, improved research portals and high-visibility marketing strategies, the library increased its online profile by more than 250 percent. By embedding a clinical library into the inpatient internal medicine and pediatrics teams, the library gave providers the rapid ability to identify obscure drug interactions, radiologic procedures and other up-to-date guidelines. With the combination of medical teaching and online medication resource sites, librarians organized and presented an array of electronic resources into customized web portals with the latest data and information.

"A lot of people didn't know we existed," said Adams, who explained that the library launched an extensive marketing campaign to raise the profile of the library. The medical librarian provided 30 department briefs throughout the medical center, as well as both the White House Clinic and the Dilorenzo Tricare Health Clinic (LT) [http://www.dthc.capmed.mil/\(GT\)](http://www.dthc.capmed.mil/(GT)) at the Pentagon.

"The Darnall Medical Library has transformed itself from a repository of information into an indispensable partner in the application of information to clinical pediatrics," explained Navy Cmdr. (Dr.) Gregory H. Gorman, program director, National Capital Consortium Pediatric Residency.

In an effort to provide library patrons with a consistent and seamless online search experience regardless of the point of access, Adams abandoned the old information technology platform and initiated an upgrade that allows users to use a new remote access

system from anywhere on any device, including smartphones and tablets. "So the whole library is right on your pad or your phone, at your convenience," the library director explained.

The new website also enables the library to build specialty portals, a kind of "mini library" within each specialty, like pediatrics or oncology, for easy access of their favorite resources like journals and eBooks. The collection for each portal is selected in direct collaboration with the leaders of the medical and nursing specialties.

"It's been a great collection development tool, helping us to get things they really want," Adams said.

Downloads from individual journal subscriptions increased 70 percent, while database article downloads and eBook views increased 445 percent. After the upgrade, searches increased 242 percent.

In addition to developing specialty portals, the medical library added Clinical Librarian Sarah Cantrell to the staff in November 2013. Cantrell introduced an embedded clinical service, spending a few days a week with a clinical team such as Internal Medicine or Pediatrics. While with them, she answers questions that may come up during rounds, provides follow-up information, and shows providers how to find information if she's not available.

The clinical librarian's interaction is the primary reason for the library's 133 percent increase in literature search requests from fiscal year 2013 to fiscal year 2014, according to Adams. Cantrell teaches and provides information directly at the point of care—at the time when decisions are being made about patient care, or when residents, interns, and physicians need additional information that will help them understand all the nuances of their patient's full case.

"Her presence on clinical rounding

See **LIBRARY** page 9

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Navy Selective Reenlistment Bonus 2015 Update

The Selective Reenlistment Bonus plan has been updated. Here are six things Sailors should know about the new plan.

1. NAVADMIN 106/15 contains the updated SRB eligibility and award level. Go read it at www.npc.navy.mil to see if you are eligible for a reenlistment bonus.

2. The increased award levels are effective immediately and decreased levels are effective 30 days from the release of the NAVADMIN.

3. Changes to award levels from the SRB plan released last April include: 26 award level increases, 25 reductions, 15 skills added, and five skills eliminated. An additional two skills were removed, but there is no loss of eligibility for Sailors since these skills were rolled into another existing SRB skill.

4. SRB provides incentives to Sailors with critical skills and experience

to stay Navy. It rewards Sailors who attain special training in skills most needed in the fleet, and helps meet critical skill reenlistment benchmarks and enhance Navy's ability to size, shape and stabilize manning. Award levels are adjusted as reenlistment requirements for specific ratings and skill sets are met.

5. Sailors eligible for a SRB reenlistment are encouraged to work with their command career counselors, command master chiefs, and chain of command to discuss timing of reenlistment and procedures well before their EAOS.

6. SRB policy can be found at <http://www.public.navy.mil/bupers-npc/career/enlistedcareeradmin/pages/srb.aspx>

For more news from Chief of Naval Personnel, visit www.navy.mil/cnp or www.navy.mil/local/cnp/.

For more news from other bases around the Washington, D.C. area,

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NSA Bethesda: From the Deckplates

What Does it Mean to be a Mother Serving in the Military?



It's hard. It's difficult. I've been in the Navy for 18 years so when you have a child when you're senior and you've been doing it a little bit longer it's easier than when you're younger and somebody's expecting you to show up at 7:30.

- Chief Petty Officer Haneefah McMillian



Being a mom is amazing. Being a working mom in the military - its definitely different and a little hard.

- Staff Sgt. Gabriela Quiroz



Being an active duty mom, I found it challenging at first ... I have to find my balance. I feel I'm getting better, but it still gets hard sometimes. Being a mom is great.

- Chief Hospital Corpsman Erly Umayam



Sacrifice. Priorities. And remembering which order to put them in so that you can satisfy both.

- Hospital Corpsman 1st Class Kendra Gibbs



It's rewarding that I have that professional satisfaction and that Dylan sees me working, but it's also challenging when I have to go away from him ... That's one thing I will say about military kids, is they're definitely resilient.

- Maj. Deanna Sheets



It's kind of difficult; the balance - being a Soldier comes first, but to me being a parent comes first, so it's just hard to balance the two, but it's rewarding to see how happy he is to see me.

- Spc. Ricquita Miller

'Telenutrition' Looks to Improve Habits of Beneficiaries

By Capt. Michael Noyes
Outpatient Nutrition Services

Walter Reed National Military Medical Center (WRNMMC) Outpatient Nutrition Services (ONS) is venturing into new patient care territory by expanding its services into the realm of telenutrition. Telenutrition is a revolutionary new way for patients to interact with their registered dietitian (RD) over video-teleconference technology. To enhance the patient experience, telenutrition offers patients ease of access to RDs without having to travel to WRNMMC. Simply, patients only need to travel to their nearest medical treatment facility (MTF), and then they will be connected to their RD at Walter Reed Bethesda. This saves the patient both money and time, which has been shown to enhance patient satisfaction ratings. Also, this helps WRNMMC save money and maximize productive time for their RDs by reducing their requirement to travel to satellite



Photo by Sharon Renee Taylor

Walter Reed National Military Medical Center (WRNMMC) Outpatient Nutrition Services (ONS) is venturing into new patient care territory by expanding its services into the realm of telenutrition, a new way for patients to interact with their registered dietitian (RD) over video-teleconference technology.

clinics or hospitals. Telenutrition also allow beneficiaries more regular, frequent access to their RD, which can improve patient compliance and outcomes. Currently, telenutrition is only available for bariatric surgery patients at Fort Belvoir Community Hospital (FBCH), but plans are to expand the service throughout the National Capital Region (NCR). The service is set to expand its operations to Fort Detrick (Md.), Fort Meade (Md.), and Dumfries Health Clinic (Va.) by the summer. In addition, WRNMMC Outpatient Nutrition Services is working with other MTFs (Landstuhl Army Medical Center, San Antonio Military Medical Center, 65th Medical Brigade, and Tripler Army Medical Center) across the Department of Defense (DOD) to develop a telenutrition package that will allow for a standardized implementation for services at all facilities throughout the DOD. For more information about telenutrition services at WRNMMC and in the NCR, contact Capt. Michael Noyes at michael.w.noyes.mil@mail.mil or 301-400-1975.

'Fairy Tales Come Alive'

Hosted by NSAB's Child Development Centers



Photos by Andrew Damstedt

Children marched, danced and sang popular songs related to fairy tales at the Child Development Centers' (CDCs) culmination celebration for the Month of the Military Child at a performance April 30 in front of their parents and other audience members. The CDCs' theme was 'Fairy Tales Come Alive,' where the toddlers and preschool-age children spent the month doing various activities related to fairy tales.



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Keep What You've Earned

From Naval Personnel Command Public Affairs

You can help prevent alcohol abuse and the associated consequences by choosing to drink responsibly every time you choose to drink. Here's what you need to know:

- Plan ahead for a safe ride home
- Don't try to keep up with others
- Know your limit, before you get there

Last month the Navy also supported Sexual Assault Awareness Month. Approximately half of all sexual assaults involve alcohol consumption by perpetrator, victim, or both, according to the National Institute of Alcohol Abuse and Alcoholism.

Being an active bystander is one way you can prevent alcohol abuse and sexual assault. If you recognize a potentially negative situation, you have the power to speak up and intervene

before an incident occurs. Protect your fellow shipmates and help them keep what they've earned.

This month the Navy will be launching its annual survey in recognition of the two-year anniversary of the "Keep What You've Earned" campaign. The anonymous survey asks you about any changes you've noticed in the drinking habits of your peers and shipmates and your awareness of alcohol abuse prevention efforts like the Keep What You've Earned campaign.

Stay tuned for the launch of the survey in the coming weeks. For more information on how you can encourage responsible drinking, visit www.nadap.navy.mil.

For more resources on sexual assault prevention, visit the Sexual Assault Awareness Prevention Month Webpage: http://www.public.navy.mil/bupers-npc/support/21st_Century_Sailor/sapr/Pages/SAAPM.aspx

BUMED

Continued from pg. 3

category, VI took first for "Aviation Medicine – Wings for the Doc," a video produced by Sherry White-Royal, deputy of video project management.

"I'm really proud of our staff, they continue to do tremendous work at the highest level possible," said Jack Lewin, VI director. "Being recognized by the DOD, in competition with the entire DOD VI community, is an outstanding accomplishment."

Competing against every component across the DOD – Navy, Air Force, Army and Marines – the VI Directorate attributed their recent accomplishments to their hard work and exceptional talents, said Tufekcuoglu. This is the second time the team has won Production of the Year, and they've taken first and second place across the board in past competitions, he said. They've been to the Rome International Film Festival, where they've won in the past as well.

Tufekcuoglu emphasized that a great amount of effort went into the 18-minute film.

"We spent about two months on logistics to ensure we would have an effective shooting schedule," he said. "We had 17 crew members, 12 actors and over 60 extras on set."

The film was shot over the span of 14 days at WRNMMC and Naval Support Activity Bethesda, he continued. The story follows leadership as they deal with a suicide, and discuss what they can do to prevent such a tragedy from happening again on their watch.

It was challenging to move so many people from location to location, he said, but the crew worked very hard and spent long days to meet their goal.

"Our team strives to be competitive when it comes to video and film production," Tufekcuoglu said. "We work very hard on advancing ourselves."

Keeping up with the latest trends in film production, the team conducts weekly production and post-production classes in-house, covering every topic from how to direct actors on set, to special effects, editing tricks and sound design, he explained.

"Our industry is always pushing the limits, and we make sure we keep up with the latest trends in film production," Tufekcuoglu said. "With all the great work our staff puts out all the time, our combined talents made this one exceptional," he said, referring to the suicide prevention video.

Entries were judged by a panel of military and media organizations, experts in the field of media production, video communication, instructional design and educational technology, he explained.

When they learned they won Production of the Year, Tufekcuoglu said, "The entire team was ecstatic. We knew the competition was stiff, but I think everybody, in the back of their minds, was saying, 'We got it this year.'"

The director also noted the team recognized the importance of this project, and the message they sought to convey – preventing suicide in the military.

"This project is an incredibly powerful and important topic, and our entire team realized this," he said. "Everybody on the crew went above and beyond to make sure this film came out the way it did. While winning an award is great in itself, if it can save the life of just one [service member], that would be the greatest achievement we have ever accomplished."

LIBRARY

Continued from pg. 4

teams holds us accountable to practicing evidence-based medicine and has more than once appropriately re-tailored my team’s approach to a clinical problem,” explained Navy Lt. (Dr.) Charles Groomes, a WRNMMC pediatrician.

Cantrell also teaches quarterly workshops, and works closely with a clinical nurse scientist who teaches an evidence-based practice course for nurses, which includes discussion of resources an helpful search tips Pediatrician Army Capt. (Dr.) Timothy Flynn said he was doubtful that their medical teams would have time to interact in person with the librarian if the clinical librarian didn’t come to them.

When patrons do have time to visit the library, they will find changes there, too.

A physical library renovation removed old study carrel desks and incorporated new couches along with a 55-inch flat screen television, incorporating more of a lounging area. “It gets away from the idea of libraries being a repository for books,” Adams said.

“Our goal is to make accessing information as easy and convenient as possible for our patrons. There is still a place for the physical library: whether it’s a place to study, use the computers, [or] a place for people to meet,” she said.

The DML maintains a collection of 5,500 print volumes, 7,500 eJournals and 1,900 eBooks covering the scope of current evidence-based medical, nursing, and allied health literature. The library also maintains PubMed citations of WRNMMC authors each month. In March, a total 41 citations appeared in publications such as Plastic Reconstructive Surgery and the Journal of General Internal Medicine.

Although the DML is a medical library that does not provide recreational titles, the library is open to everyone, according to Adams, including patients and their family members, staffers, or anyone with a CAC card. Individuals only need a library card, which can be obtained at the library, if they want to check out a book. The library is staffed Monday through Friday from 7 a.m. to 5:30 p.m. Individuals needing materials after that time can gain access via the command duty office.

VETERANS

Continued from pg. 1

ciation, and spoke highly of the care they received. Among those patients, James Hall described his experience as “outstanding,” having received a total left knee replacement. The retired Army lieutenant colonel said the staff at all levels were “highly motivated,” throughout his entire stay.

“What a team they really are,” he said. “By far, this has been the best hospital I’ve ever seen in my life ... I appreciate it so much.”

The veteran, who served in the military from 1961 to 1989 as both enlisted and as an officer, said he will go on to receive physical therapy closer to home at a medical center in Woodstock, Va. As he prepared to discharge from the hospital May 1, he said he hopes to return back to work soon, running his llama farm in the Shenandoah Valley.

Hall also spoke highly of the orthopedic surgeons, including Dr. Gwinn, who also helped Hall’s daughter find a place to stay at the Navy Lodge on Naval Support Activity Bethesda, home of WRNMMC, so she could be there for her father after the procedure.

“He’s just wonderful,” Hall said. “It was a great experience.”

COMMANDANT

Continued from pg. 2

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Traumatic Brain Injury Educational Forum Links Best Practices, Current Research

By MC1(AW) Chris Krucke
WRNMMC Public Affairs
staff writer

Researchers and caretakers recently logged in for real-time interaction during the Traumatic Brain Injury (TBI) Educational Forum held online, live from the Clark Auditorium at Walter Reed National Military Medical Center (WRNMMC) via Defense Connect On-line.

The educational forum was designed to review best practices in the assessment and treatment of TBI. Topics included the Military Health System TBI Pathway of Care, key research studies and findings that will contribute to the body of TBI knowledge and prevention.

Multidisciplinary health care providers in military treatment facilities, complex polytrauma facilities and community-based Veterans Affairs (VA) facilities participated in this discussion of evidence-based practice and current research.

“We need to continue to expand our understanding of TBI recovery, long term consequences, effects of rehabilitation efforts, and the best ways to manage comorbid conditions in an effort to improve care for individuals who have sustained TBI,” said Dr. Joel Scholten, associate chief of staff for Rehabilitation Services



Photo by Mass Communication Specialist 1st Class Christopher Krucke

A panel of researchers and caretakers discusses best practices in the assessment and treatment of traumatic brain injury during a recent Traumatic Brain Injury (TBI) Educational Forum held in Clark Auditorium at Walter Reed National Military Medical Center.

for the VA Medical Center, Washington, D.C., who served as keynote speaker.

Scholten, who had a close family member experience a severe head injury, said he was drawn to the field of physical medicine and rehabilitation during medical school because he was able to assist impaired individuals to achieve their

maximum level of independence.

Scholten said every service member and veteran is unique; therefore, every individual who sustains a TBI will have unique symptoms and need an individualized approach to their rehab plan.

“Education, counseling, support and exercise are some of the most important recommendations/interventions that TBI specialists can promote for their patients,” he said. “Medications are rarely the answer for TBI symptoms.”

Scholten said the DOD and VA have devoted significant time and assets to providing TBI care for service members and veterans, and that “there is an exceptional level of dedication and commitment from leadership and frontline staff to provide outstanding care, promote understanding of TBI, and continue to advance TBI research.”

According to the Defense and Veterans Brain Injury Center (DVBIC), more than 18,500 service members sustained a TBI in the first nine months of 2014. Final data for the year has not yet been reported.

“Something I find powerful that was discussed during this event is that over 80 percent of diagnosed TBIs in the military are diagnosed in a non-combat setting,” said Heather Kopf, Regional Education Coordinator, National Intrepid Center of Excellence (NICoE).

According to Kopf, the majority of these TBIs are classified as mild and tend to have a quick recovery rate. She added that this population is recovering at a more local level of care, such as their units, bases, clinics, etc.

WRNMMC can see several hundred service members a year, who tend to have more complications and co-occurring conditions.

“This statistic always resonates with me,” Kopf said, “showcasing just how important it is to educate people in prevention methods and the importance of seeking care in the case of a possible concussion.”

Kopf said there are a number of reasons why she got into TBI education.

With the combination of her background in psychology and having sustained a number of mild TBIs herself, she said she became very passionate about educating others and helping them understand their injury.

“I’ve found that when you educate those affected by TBI, including families, they tend to feel more in control of the injury,” said Kopf. “This education is so important in the recovery process.”

This year’s forum also included the DVBIC webinar. Army Maj. Pamela A. DiPatrizio, chief of the Office of Education Outreach explained that the webinar helps reach worldwide audiences, allowing communication between large numbers of people regardless of their location.

The DVBIC offers monthly educational webinar presentations, providing an opportunity for health-care providers to share their experiences and expertise about TBIs with other providers and stakeholders.

“The health care community reaps benefits as they look to DVBIC as the trusted resource for TBI information,” said DiPatrizio. “Webinars allow the providers, community and customers to hear DVBIC talk about what we do best - taking care of our service members, their families and veterans. It makes us more human by enabling them to communicate directly with a real person, and not just viewing a website.”

“Traumatic brain injury can affect anyone and I think that’s why it’s so important to keep these conversations going, because anyone can sustain a TBI and we’re learning more and more every day about the injury,” Kopf said. “The more we’re involved in this discussion and are learning, the better we can care for and treat those who have sustained these types of injuries.”

There are a number of educational opportunities and resources available on the DVBIC website at <https://dvbic.dcoe.mil>, or by contacting Heather Kopf at heather.n.kopf.ctr@mail.mil.

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